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EXAMINER PORTER, RACHEL L				
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

patentmail@whda.com

Office Action Summary

Application No.

10/578,271

Applicant(s)

MATSUNAGA, ATSUSHI

Examiner

RACHEL L. PORTER

Art Unit

3626

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --
Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 04 May 2006.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-32 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-32 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☒ The drawing(s) filed on 04 May 2006 is/are: a) ☐ accepted or b) ☒ objected to by the Examiner.
- Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
- Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
- 3) ☒ Information Disclosure Statement(s) (PTO/SB/22)
- 4) ☐ Interview Summary (PTO-413)
- 5) ☐ Notice of Informal Patent Application
- 6) ☐ Other: _____
- Paper No(s)/Mail Date _____

DETAILED ACTION

1. This communication is in response to the application filed 5/4/06 and the preliminary amendment filed 5/4/06. Claims 1-32 are pending.

Information Disclosure Statement

2. The information disclosure statement filed 5/4/06 fails to comply with 37 CFR 1.98(a)(2), which requires a legible copy of each cited foreign patent document; each non-patent literature publication or that portion which caused it to be listed; and all other information or that portion which caused it to be listed. It has been placed in the application file, but the information referred to therein has not been considered, as indicated on the IDS.

The listing of references in the Search Report is not considered to be an information disclosure statement (IDS) complying with 37 CFR 1.98. 37 CFR 1.98(a)(2) requires a legible copy of: (1) **each foreign patent**; (2) **each publication or that portion which caused it to be listed**; (3) for each cited pending U.S. application, the application specification including claims, and any drawing of the application, or that portion of the application which caused it to be listed including any claims directed to that portion, unless the cited pending U.S. application is stored in the Image File Wrapper (IFW) system; and (4) all other information, or that portion which caused it to be listed. In addition, each IDS must include a list of all patents, publications, applications, or other information submitted for consideration by the Office (see 37 CFR

1.98(a)(1) and (b)), and MPEP § 609.04(a), subsection I. states, "the list ... must be submitted on a separate paper." Therefore, the references cited in the Search Report have not been considered. Applicant is advised that the date of submission of any item of information or any missing element(s) will be the date of submission for purposes of determining compliance with the requirements based on the time of filing the IDS, including all "statement" requirements of 37 CFR 1.97(e). See MPEP § 609.05(a).

Specification

3. Applicant is reminded of the proper language and format for an abstract of the disclosure.

The abstract should be in narrative form and generally limited to a single paragraph on a separate sheet within the range of 50 to 150 words. It is important that the abstract not exceed 150 words in length since the space provided for the abstract on the computer tape used by the printer is limited. The form and legal phraseology often used in patent claims, such as "means" and "said," should be avoided. The abstract should describe the disclosure sufficiently to assist readers in deciding whether there is a need for consulting the full patent text for details.

The language should be clear and concise and should not repeat information given in the title. It should avoid using phrases which can be implied, such as, "The disclosure concerns," "The disclosure defined by this invention," "The disclosure describes," etc.

4. The abstract of the disclosure is objected to because it is multiple paragraphs and exceeds 150 words. Correction is required. See MPEP § 608.01(b).
5. The disclosure is objected to because of the following informalities: Paragraph 246 of the specification states the following: "computer readable recording media

having the program recorded thereon such CD-ROMs, *MOs or FDs...*" The examiner requests clarification of the abbreviations "MO" and "FD" in the specification.

Appropriate correction is required.

Drawings

6. The drawings are objected to because the size of the font renders the text illegible in Figures 2-5d and 12—12b. Furthermore, the use of shading/grayscale in Figures 12a and 12b also makes the information in the drawings difficult to discern. Corrected drawing sheets in compliance with 37 CFR 1.121(d) are required in reply to the Office action to avoid abandonment of the application. Any amended replacement drawing sheet should include all of the figures appearing on the immediate prior version of the sheet, even if only one figure is being amended. The figure or figure number of an amended drawing should not be labeled as "amended." If a drawing figure is to be canceled, the appropriate figure must be removed from the replacement sheet, and where necessary, the remaining figures must be renumbered and appropriate changes made to the brief description of the several views of the drawings for consistency. Additional replacement sheets may be necessary to show the renumbering of the remaining figures. Each drawing sheet submitted after the filing date of an application must be labeled in the top margin as either "Replacement Sheet" or "New Sheet" pursuant to 37 CFR 1.121(d). If the changes are not accepted by the examiner, the applicant will be notified and informed of any required corrective action in the next Office action. The objection to the drawings will not be held in abeyance.

Claim Rejections - 35 USC § 112

7. The following is a quotation of the second paragraph of 35 U.S.C. 112:

The specification shall conclude with one or more claims particularly pointing out and distinctly claiming the subject matter which the applicant regards as his invention.

8. Claims 1-31 are rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.

[Claims 1-24]

9. Regarding claim 1, the phrase "such as" in line 4 renders the claim indefinite because it is unclear whether the limitations following the phrase are part of the claimed invention. See MPEP § 2173.05(d).

Claims 2-24 inherit the deficiencies of claim 1 through dependency, and are therefore also rejected.

10. Claim 4 recites the limitation "in conjunction with said table." There is insufficient antecedent basis for this limitation in the claim. Claim 1 does not recite a table.
11. Claim 6 recites the limitation "said graph." There is insufficient antecedent basis for this limitation in the claim. Claim 1 does not recite a graph.
12. Claims 10 and 11 recite the limitation "said electronic chart information." There is insufficient antecedent basis for this limitation in the claim. Claim 1 does not recite electronic chart information.

13. Claim 12 recites the limitation "the day reserved in the next-reservation information" in lines 2-3. There is insufficient antecedent basis for this limitation in the claim. Claim 1 does not discuss appointments or reservations.

14. Claim 13 recites the limitation "said graph." There is insufficient antecedent basis for this limitation in the claim. Claim 1 does not recite a graph. Claim 15 inherits the deficiencies of claim 13 through dependency and is therefore also rejected.

15. Regarding claims 16 and 18, the phrase "such as" renders the claim indefinite because it is unclear whether the limitations following the phrase are part of the claimed invention. See MPEP § 2173.05(d).

16. Claim 18 recites the limitation "said graph." There is insufficient antecedent basis for this limitation in the claim. Claim 1 does not recite a graph. Claim 15 inherits the deficiencies of claim 13 through dependency and is therefore also rejected.

17. Claims 19-21 recite the limitation "said consultation terminal." There is insufficient antecedent basis for this limitation in the claim. Claim 1 does not recite a consultation terminal.

18. Regarding claims 22 and 24, the phrase "such as" in line 4 renders the claim indefinite because it is unclear whether the limitations following the phrase are part of the claimed invention. See MPEP § 2173.05(d).

[claims 25-31]

Regarding claims 25-31, it is not clear which statutory class of invention the applicant intends to claim. Exemplary claim 25 recites "[a]n electronic medical information program for causing... a computer to function as: an input means for inputting...; an accumulation means for accumulating....." The Examiner understands this claim to be distinct from a system claim which recites "a system comprising: input means for inputting...; accumulation means for accumulating..." (i.e. not a system claim invoking means-plus-function).

The present claim does not recite a program "comprising" or "including" input means, accumulation means, etc. The current claim language recites a program for causing a computer to function in a particular manner. Furthermore, because dependent claim 32 recites "[a] computer readable recording media for storing the electronic medical information program according to claim 25," the Examiner interprets this to mean that claim 25 is not tied to or stored on any media. In other words, the Examiner understands claims 25-31 as being drawn to program/ software, *per se*.

Claim Rejections - 35 USC § 101

19. 35 U.S.C. 101 reads as follows:

Whoever invents or discovers any new and useful process, machine, manufacture, or composition of matter, or any new and useful improvement thereof, may obtain a patent therefor, subject to the conditions and requirements of this title.

Claims 25-31 and 32 are rejected under 35 U.S.C. 101 because the claimed invention is directed to non-statutory subject matter.

[claims 25-31]

In the present case, the current language of claim 25 recites "an electronic information program," or software, *per se*. Data structures not embodied on a computer readable media are considered descriptive material. They are therefore considered non-statutory because they are not capable of causing a functional change in a computer. As drafted, the claim fails to define any structural and functional interrelationships between the code and other elements of a computer that permit the computer program's function to be realized. (See MPEP § 2106.01)

In light of the above, it is respectfully submitted that the claimed invention fails to recite to satisfy the requirements of 35 U.S.C. 101.

Claims 26-31 contain similar deficiencies and fail to correct the deficiencies of claim 25, and are therefore also rejected.

[Claim 32]

The broadest reasonable interpretation of a claim drawn to a computer readable medium (also called machine readable medium) typically covers forms of non-transitory tangible media and transitory propagating signals *per se* in view of the ordinary and customary meaning of computer readable media, particularly when the specification is silent. See MPEP 2111.01. When the broadest reasonable interpretation of a claim covers a signal *per se*, the claim must be rejected under 35 U.S.C. 101 as covering non-statutory subject matter. See *In re Nuijten*, 500. F.3d 1346, 1356-57 (Fed. Cir. 2007) (transitory embodiments are not directed to statutory subject matter).

Claim 32 currently recites "a computer readable recording media" for storing the electronic medical information program according to claim 25. Applicant's specification describes computer readable recordable media in par. 246 of US 2007/0106535 A1 (Applicant's PG-Pub) and provides examples (CD-ROMs, MOs or FDs). It is not clear what the terms "MOs" and "FDs" represent, (i.e. whether they are intended to cover non-transitory media or transitory media).

A claim drawn to such a computer readable medium that covers both transitory and non-transitory embodiments may be amended to narrow the claim to cover only statutory embodiments to avoid a rejection under 35 U.S.C. 101 by adding the limitation "non-transitory" to the claim.

Claim Rejections - 35 USC § 102

20. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

21. Claims 1-3, 6, 8-32 are rejected under 35 U.S.C. 102(b) as being anticipated by Iliff (US 5935060A—referred to hereinafter as simply Iliff)

[claim 1] Iliff discloses an electronic medical information system using a computer to manage electronic medical information such as charts, said electronic medical information system being equipped with a control server (Figures 1a,b) comprising:

- an input means for inputting, among the information written on said charts, patient's chief complaint information into a chief complaint information file and for inputting doctor's consultation information associated with said patient's chief complaint information into a consultation information file; (Figures 1a,b, 2; col. 4, lines 14-50)
- an accumulation means for accumulating said chief complaint information and said consultation information; (Figure 3; col. 6, lines 11-18—system databases; col. 8, lines 20-43: *the system can slow down to identify the patient and determine the Chief Complaint(s). Then the system invokes the Script Routing subsystem, whose job is to determine the patient's general problem area; The patient responses are also captured by the script engine, formatted for the script, and used to select the next question from the script. This interplay of the script and its script engine may consider the patient's medical record, the information provided so far during this session, and even some meta functions to determine the next question.*)
- a calculation means for scoring, with respect to each date of consultation, the latest chief complaint information and consultation information input by said input means, and the past chief complaint information and consultation information accumulated by said accumulation means, respectively; (col. 9, lines 1-13: each script of a set of time-based scripts may have somewhat different symptoms and weights, so that the author sets up time-based symptoms with extra weights for those diseases whose time-pattern matches the patient's. These weights are

automatically added by the script engine as it runs. Each algorithm author must compose, assign, or calculate the questions and the appropriate values at (for instance) each hour as the disease progresses; See also col. 21, lines 26-60) and

- a generation means for automatically generating, based on said scores, a list by which a temporal variation of said chief complaint information and consultation information can be viewed. (col. 22, lines 10-35)

[claim 2] Iliff discloses the electronic medical information system according to claim 1, wherein said control server comprises a display means for displaying said list to be viewable. (Figure 1a,b; col. 4, lines 14-22)

[claim 3] Iliff discloses the electronic medical information system according to claim 1, wherein said control server is configured to set and display a table in which a plurality of symptoms and degrees of respective symptoms are selectably listed, (col. 9, lines 21-30; 41-48) and the input means of said chief complaint information and consultation information automatically inputs one or more relevant symptoms and degrees of symptoms, in response to the user operation of selecting them from the table, into said chief complaint information file and the consultation information file, (col. 9, lines 19-35) and wherein said calculation means is configured to automatically calculate by aggregating relevant scores corresponding to the degree of the selected symptom, with each of said degrees of symptoms having a pre-defined score assigned thereto. (col. 13, lines 10-27; col. 21, lines 26-60)

[claim 6] Iliff discloses the electronic medical information system according to claim 1, wherein said list generation means is configured to present said scores calculated by said calculation means in time series for respective symptoms of the chief complaint information and consultation information (col. 22, lines 10-35) (so that it can be compared with the temporal variation of said graph.—intended use)

[claim 8] Iliff discloses the electronic medical information system according to claim 1, wherein said control server comprises a generation means for generating a list so that, when the patient is receiving consultation for a plurality of different diseases around the same period, the respective diseases can be viewed on the same screen in a distinguishable manner. (Figure 14-15; col. 27, lines 1-26; col. 28, lines 6-32)

[claim 9] Iliff discloses the electronic medical information system according to claim 1, wherein said control server comprises: an input means for inputting electronic chart information composed of one or more of information as to disease name, chief complaint reported at the consultation, history of present illness, anamnesis, anamneses of family members, observations of the doctor, inspection, treatment, dosage, injection/instillation, next-reservation (figures 1-2; col. 5, lines 13-20); a generation means for generating an electronic chart based on the input information (col. 5, lines 51-67); a storage means for storing the generated electronic chart into an electronic chart file (col. 6, lines 1-18) ; a reading means for setting and displaying, on

said list, a link button associated with the electronic chart and reading the electronic chart from said electronic chart file when the link button is pressed (col. 4, lines 40-50); and a display means for displaying the electronic chart which has been read out to be viewable. (col. 5, lines 21-25)

[claim 10] Iliff discloses the electronic medical information system according to claim 1, wherein the input means for inputting said electronic chart information is configured to input handwritten information either in an imaged or coded manner. (col. 4, lines 14-22--input means and image capture include camera to gather information about the patient's symptoms).

[claim 11] Iliff discloses The electronic medical information system according to claim 1, wherein the input means for inputting said electronic chart information comprises: an audio input means, such as a microphone, for inputting audio information; and an image input means such as a camera for inputting image information, and wherein said electronic chart generation means generates an electronic chart so that the audio information and image information can be reproduced from the electronic chart as a part of the electronic chart.(col. 4, lines 14-22—input means and image capture include camera to gather information about the patient's symptoms; col. 4, lines 24-39—system also includes with voice recognition components)

[claim 12] Iliff discloses the electronic medical information system according to claim 1, wherein if the patient did not appear on the day reserved in the next-reservation information which has been input by said input means of electronic chart information,

said list generation means generates the list after clearing the field for the day.(see 112, 2nd paragraph rejection:—col. 22, lines 24-34- the process 490 could schedule a re-enter session to allow a length of time to pass and see if a diagnosis could be reached at a later time. At state 524, process 490 requests the patient to have tests performed and to consult the system again. These tests may include self-exam maneuvers, imaging modality tests (258, FIG. 2) or laboratory tests (260, FIG. 2). At state 526, process 490 forwards any urgent results to a health care provider for immediate action.)

[claim 13] liff discloses the electronic medical information system according to claim 1, wherein said control server comprises: a reading means for reading, from said electronic chart file, one or more of information as to inspection, treatment, dosage, and injection/instillation (col. 5, lines 21-25; col. 6, lines 1-18; Figures 1 a, b); and an accumulation means for accumulating the information which has been read out, (col. 6, lines 11-18) and wherein said control server sets/displays a link button for each information on the list when said list generation means arranges the temporal variation of each of the accumulated information in time series so that it can be compared with the temporal variation of the said graph, reads corresponding information accumulated by said accumulation means upon pressing of any of the link buttons, and display the information which has been read out to be viewable. (col. 8, lines 63-col. 9, lines 16)

[claim 14] Iliff discloses the electronic medical information system according to claim 1, wherein said control server comprises: a storing means for storing, into a conventional chart file, a conventional chart converted into an electronic document format which precisely reproduces an original image (col. 6, lines 1-18); a reading means for reading, upon request for viewing the conventional chart file, a conventional chart requested for viewing from said conventional chart file (col. 4, lines 40-50); and a display means for displaying the conventional chart which has been read out to be viewable. (col. 5, lines 21-25)

[claim 15] Iliff discloses the electronic medical information system wherein, of the information recorded in said conventional chart file, the information corresponding to said electronic chart information is accumulated by the accumulation means (col. 6, lines 11-18) and said list generation means is configured to present the temporal variation of each information of the accumulated conventional chart in time series so that it can be compared with the temporal variation of said graph. (col. 8, lines 63-col. 9, lines 16)

[claim 16] Iliff discloses the electronic medical information system according to claim 1, wherein said input means of chief complaint information is implemented by transmitting data, to the control server, from a communication terminal used by the doctor for consultation via a LAN or a WAN, or from the patient's communication terminal via a communication network such as the Internet. (col. 3, lines 66-col. 4, line 50)

[claim 17] Iliff discloses the electronic medical information system according to claim 1, wherein said input means of consultation information is implemented by transmitting data from said consultation terminal to said control server. (col. 2, lines 24-42; col. 3, lines 66-col. 4, line 50)

[claim 18] Iliff discloses the electronic medical information system according to claim 1, wherein said patient's communication terminal transmits, via a communication network such as the Internet, vital information including one or more of the patient's weight, blood pressure, frequency of meals, content of meals, taking exercise or not, and sleeping hours to said control server, (col. 4, lines 1-39; col. 10, line 59-col. 11, line 5) with said control server comprising an input means for receiving the transmitted vital information and inputting it into a vital information file, (col. 4, lines 1-39) and a generation means for generating said list by arranging the vital information in time series so that it can be compared with the temporal variation of said graph. (col. 8, lines 55-col. 9, line 15)

[claim 19] Iliff discloses the electronic medical information system according to claim 1, wherein said input means of electronic chart information is implemented by transmitting data from said consultation terminal to said control server via a LAN or a WAN. (col. 4, lines 1-50)

[claim 20] Iliff discloses the electronic medical information system according to claim 1, wherein said consultation terminal comprises an input means for inputting handwritten information in an imaged or coded form. (col. 4, 14-22—camera for inputting image information)

[claim 21] Iliff discloses the electronic medical information system according to claim 1, wherein said consultation terminal comprises said audio input means and said image input means. .(col. 4, lines 14-22—input means and image capture include camera to gather information about the patient's symptoms; col. 4, lines 24-39—system also includes with voice recognition components)

[claim 22] Iliff discloses the electronic medical information system according to claim 1, wherein, upon receiving a request, via a communication network such as a LAN, a WAN, or the Internet, for viewing said list or the information accumulated by said accumulation means from said consultation terminal, said patient's communication terminal, and a communication terminal of a viewer such as an inspection engineer, a dispensing pharmacy clerk, an ambulance crew, a paramedic, a doctor on duty, or a doctor of another hospital, said control server is configured to display the list or said each information to be viewable, within the authorized range, from the consultation terminal, the patient's communication terminal, and the viewer's communication terminal, respectively. (col. 4, lines 1-50;col. 5, lines 13-50)

[claim 23] Iliff discloses the electronic medical information system according to claim 1, wherein said control server is configured such that, by letting an IC card reader/writer connected to a communication terminal read the IC card carried by a person permitted to use the communication terminal being one or more of said consultation terminal, said patient's communication terminal, and the viewer's communication terminal, said control server receives a signal requesting authorization via a communication network such as a LAN, a WAN, or the Internet and performs said authorization. (col. 5, lines 51-col. 6,

line 18—restricted authorized access for users; also col. 5, lines 13-18 —network interface cards for communication)

[claim 24] Iliff discloses the electronic medical information system according to claim 1, wherein said control server is configured such that, by letting the reader/writer connected to the communication terminal of a viewer such as an ambulance crew, a paramedic, or a doctor on duty read said IC card carried by the patient and the IC card carried by the ambulance crew, the paramedic, or the doctor on duty, in case of emergency, the control server receives and authorizes a signal requesting authorization via a communication network such as a LAN, a WAN, or the Internet, and displays at least said information of history of present illness and anamnesis so that they can be viewed with the viewer's communication terminal. col. 5, lines 51-col. 6, line 18—restricted authorized access for users; also col. 5, lines 13-18 —network interface cards for communication)

[claim 25] Iliff discloses an electronic medical information program for causing, for the purpose of introducing electronic medical information, a computer to function as: an input means for inputting said patient's chief complaint information into its chief complaint information file and for inputting said doctor's consultation information into its consultation information file; an accumulation means for accumulating the chief complaint information input into the chief complaint information file and the consultation information input into the consultation information file; a calculation means for scoring, with respect to each date of consultation, the input latest chief complaint information

and consultation information, and the accumulated past chief complaint information and consultation information, respectively; a generation means for automatically generating, based on the calculated scores, a list by which the temporal variation of the chief complaint information and consultation information can be viewed. (See col. 4, line 1-50, and the citations provided in the rejection of claim 1)

[claim 26] Iliff discloses the electronic medical information program according to claim 25 for causing, for the purpose of introducing electronic medical information, a computer to function as a display means for displaying said list. (col. 4, lines 14-22)

[claim 27] Iliff discloses the electronic medical information program according to claim 25 for causing, for the purpose of introducing electronic medical information, a computer to function as: an input means for inputting said electronic chart information(col. 6, lines 1-18); a generation means for generating an electronic chart from the input electronic chart information; a storing means for storing the generated electronic chart in an electronic chart file; a reading means for setting/displaying link buttons associated with the electronic chart file on said list and reading, upon pressing of any of the link buttons, the electronic chart from said electronic chart file; (col. 4, lines 40-50); and a display means for displaying the electronic chart which has been read out to be viewable. . (col. 5, lines 21-25)

[claim 28] Iliff discloses the electronic medical information program according to claim 25 for causing, for the purpose of introducing electronic medical information, a computer to function as: a reading means for reading, from said electronic chart file, one or more of information as to inspection, treatment, dosage, and injection/instillation;

(figures 1-2; col. 5, lines 13-20) an accumulation means for accumulating the information which has been read out; said list generation means for arranging the temporal variation of each of the accumulated information in time series so that it can be compared with the temporal variation of said graph; a reading means for setting/displaying a link button for each information on the list and reading the corresponding information accumulated by said accumulation means upon pressing of any of the link buttons; and a display means for displaying the information which has been read out to be viewable. (See figures 1-2; col. 5, lines 13-25; col. 5, lines 51-67; col. 6, lines 1-18)

[claim 29] Iliff discloses the electronic medical information program according to claim 25 for causing, for the purpose of introducing electronic medical information, a computer to function as: a storage means for storing, into a conventional chart file, said conventional chart converted into an electronic document format which precisely reproduces an original image (col. 6, lines 1-18); a reading means for reading, upon request for viewing the conventional chart file, a conventional chart requested for viewing from said conventional chart file (col. 4, lines 40-50); and a display means for displaying the conventional chart which has been read out to be viewable. (col. 5, lines 21-25)

[claim 30] Iliff discloses the electronic medical information program according to any claim 28 for causing, for the purpose of introducing electronic medical information, a computer to function as: an accumulation means for accumulating, using the

accumulation means the information corresponding to said electronic chart of the information recorded in said conventional chart file col. 6, lines 11-18); and a generation means for generating said list by arranging the temporal variation of each information of the accumulated conventional chart in time series so that it can be compared with the temporal variation of said graph. (col. 8, lines 63-col. 9, lines 16)

[claim 31] Iliff discloses the electronic medical information program according to claim 25 for causing, for the purpose of introducing electronic medical information, a computer to function as: an input means for receiving, upon transmission of vital information including at least one or more of information of the patient's weight, blood pressure, frequency of meals, content of meals, taking exercise or not, sleeping hours, from said patient's communication terminal to the computer via a communication network such as the Internet, (col. 4, lines 1-39; col. 10, line 59-col. 11, line 5) the transmitted vital information and inputting it into a vital information file (col. 4, lines 1-39); and a generation means for generating said list by arranging the vital information in time series so that it can be compared with the temporal variation of said graph. (col. 8, lines 55-col. 9, line 15)

[claim 32] Iliff discloses a computer readable recording media for storing the electronic medical information program according to claim 25. (col. 4, lines 45-50)

Claim Rejections - 35 USC § 103

22. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

23. Claims 4 and 7 are rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff (US 5935060A—referred to hereinafter as simply Iliff) in view of Chikovani et al (US 6383135B1)

[claim 4] Iliff teaches the electronic medical information system according to claim 1 wherein said control server is configured to include a display (Figures 1a, e.g. display a table (col. 9, lines 41-48)), but does not expressly disclose displaying an image simulating a human body with check buttons to describe symptoms.

Chikovani discloses a triage system configured to an image simulating a human body with check buttons on major regions thereof, and when any one of said symptoms is selected, the check button corresponding to the region which is developing the selected symptom is automatically checked. (Figures 3-4; col. 4, lines 32-53). At the time of the applicant's invention, it would have been obvious to one of ordinary skill in the art to modify the system of Iliff with the teaching of Chikovani to provide an image of the body that allows users to select an area where symptom is located. As suggested by Chikovani, one would have been motivated to include this feature to allow the patient to more accurately visualize and identify the specific region where the symptoms are. (col. 2, lines 16-19)

[claim 7] Iliff teaches the electronic medical information system according to claim 1, wherein said control server comprises a display means (Figures 1a, e.g. display a table (col. 9, lines 41-48)), but does not expressly disclose displaying an image simulating a human body with check buttons to describe symptoms.

Chikovani discloses a triage system including a display means when symptoms of the chief complaint information and consultation information are input by said input means, link buttons at the region where the respective symptoms are developing on the image simulating the human body; a reading means for reading, from the chief complaint information or consultation information accumulated in said accumulation means, each information of the region displaying the link button when the displayed link button is pressed; and a display means for displaying each information which has been read to be viewable (Figures 3-4; col. 3, lines 44-50; col. 4, lines 32-53; col. 5, lines 6-17). At the time of the applicant's invention, it would have been obvious to one of ordinary skill in the art to modify the system of Iliff with the teaching of Chikovani to provide an image of the body that allows users to select an area where symptom is located. As suggested by Chikovani, one would have been motivated to include this feature to allow the patient to more accurately visualize and identify the specific region where the symptoms are. (col. 2, lines 16-19)

24. Claims 5 is rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff in view (US 5935060A—referred to hereinafter as simply Iliff) in view of Iliff '093 (US 6569093B2)

[claim 5] Iliff discloses the electronic medical information system according to claim 1, as explained in the rejection of claim 1, but does not expressly disclose a graphing feature.

Iliff'093 discloses a system wherein said list generation means is configured to automatically generate a graph by which temporal variation of the scores calculated by said calculation means can be viewed. (col. 25, lines 55-col. 26, line 25; col. 26, line 35-col. 28, line 32) At the time of the Applicant's invention, it would have been obvious to one of ordinary skill in the art to modify the system of Iliff with the teaching of Iliff'093 to generate graphs of temporal variation of symptoms. As suggested by Iliff'093, one would have been motivated to include this feature because the way in which a symptom varies over time has great diagnostic significance and various aspects of a symptom time series aid in the general ability to provide or refine a diagnosis. (col. 25, lines 55-65)

Conclusion

Any inquiry concerning this communication or earlier communications from the examiner should be directed to RACHEL L. PORTER whose telephone number is (571)272-6775. The examiner can normally be reached on M-F, 9:30-6:00.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Jerry O'Connor can be reached on (571) 272-6787. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/R. L. P./
Examiner, Art Unit 3626

/Robert Morgan/
Primary Examiner, Art Unit 3626